#### **CALIFORNIA FORM** FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

Date Received STATEMENT OF ECONOMIC INTERESTS CEIVED OF A CATHER POLITICAL CITY CLERK'S OFFICE COVER PAGE INSTITUTE OF SACRAMENTO

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2013 FEB 20 AM 11: 28/013 FEB 14 A 11: 06 NAME OF FILER (MIDDLE) (FIRST) (LAST) McCarty, Kevin M 1. Office, Agency, or Court Agency Name CITY OF SACRAMENTO Division, Board, Department, District, if applicable Your Position Mayor and Council Office City Council ▶ If filing for multiple positions, list below or on an attachment. Adency: \*SEE ATTACHED FOR ADDITIONAL POSITIONS 2. Jurisdiction of Office (Check at least one box) Judge or Court Commissioner (Statewide Jurisdiction) ☐ State Multi-County \_\_\_\_ County of \_\_\_ X Other Multi jurisdictions X City of Sacramento 3. Type of Statement (Check at least one box) X Annual: The period covered is January 1, 2012, through Leaving Office: Date Left \_\_\_\_/\_\_ December 31, 2012 (Check one) O The period covered is January 1, 2012, through the date of The period covered is \_\_\_\_\_\_, through leaving office. December 31, 2012. O The period covered is \_\_\_\_\_\_\_, through the date Assuming Office: Date assumed \_\_\_\_/\_\_\_\_\_ of leaving office. Candidate: Election Year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_ 4. Schedule Summary ► Total number of pages including this cover page: \_\_\_6 Check applicable schedules or "None." [X] Schedule C - Income, Loans, & Business Positions - schedule attached X Schedule A-1 - Investments - schedule attached Schedule A-2 - Investments - schedule attached X Schedule D - Income - Gifts - schedule attached X Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached None - No reportable interests on any schedule

nerein and in any attached schedules is true and complete. I acknow I certify under penalty of perjury under the laws of the State of C 02/06/2013 Date Signed \_ (month, day, year)

Agency	Division, Board, Department, District	Position
CITY OF SACRAMENTO	Sacramento Regional Arts Facilities Financing Authority	Member
Regional Human Rights/Fair Housing Commission	Mayor and Council Office	Member
Sac Metropolitan Cable Commission	Mayor and Council Office	Member
Sac Public Library Authority	Mayor and Council Office	Member
Sac Regional County Solid Waste Authority	Mayor and Council Office	Member
Sac Transportation Authority	Mayor and Council Office	Member
Sac Regional County Sanitation District	Mayor and Council Office	Member

# SCHEDULE A-1 Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
McCarty, Kevin M

NAME OF BUSINESS ENTITY	
	► NAME OF BUSINESS ENTITY
ICMA	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
D 11	
Retirement Corporation	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000\$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
X \$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF BUILDING
Stock X Other Mutual Funds	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	income Received of \$500 or More (Report on Schedule C)
IF ADDITION F LIGHT DATE	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF DISCHIESE ENTITY
P WANTE OF BOSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or Mare (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACCUMPED	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
,	The state of booksepa Elvisia
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
EAID MADICET VALUE	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACCUMPED PROPERTY	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
_	
Comments:	

# SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
McCarty, Kevin M

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	➤ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
3809 T Street	1911 14th Street 1913 14th Street
Citt	CITY
Sacramento CA 95816	Sacramento CA 95814
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000/	\$2,000 - \$10,000 \$10,001 - \$100,000
X \$100,001 - \$1,000,000 ACQUIRED DISPOSED	X \$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
∑ Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	\$0 - \$499
X \$10,001 - \$100,000 OVER \$100,000	X \$10,001 - \$100,000 ☐ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Issaiga Barovda	Barbara Mason
Jessica Pereyda	Daibara Wason
	Jeff Rodgers
* Voy are not required to report loops from a supplied	Landing to Attack
business on terms available to members of the public w	lending institutions made in the lender's regular course of
loans received not in a lender's regular course of busine	
NAME OF LENDER*	NAME OF LENDER*
Bank of America	Chase
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
100 N tyron St, #220	270 Park Avenue
Charlotte NC 28202	New York NY 10017
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
Mortgage Lender	Mortgage Lender
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
4.50%	5.25%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
☐ \$10,001 - \$100,000 🛛 OVER \$100,000	S10,001 - \$100,000 X OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
Comments:	

## SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
McCarty, Kevin M

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Preschool California	Leticia Garcia
ADDRESS (Business Address Acceptable) 414 13th Street, #500 Oakland CA 94612	ADDRESS (Business Address Acceptable) State Capitol, Rm 3048 Sacramento CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Sr Policy Advisor/Legislative Advocate	Legislative Assistant
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	[] \$500 - \$1,000 [] \$1,001 - \$10,000
X \$10,001 - \$100,000 OVER \$100,000	X \$10,001 - \$100,000 ☐ OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
☐ Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of(Real property, car, boal, etc.)	Sale of(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other(Describe)	Other(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	RIOD
* You are not required to report loans from commercial le retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a e lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	City
\$1,001 - \$10,000	·
\$10,001 - \$100,000	Guarantor
OVER \$100,000	Other
	(Describe)
Comments:	

### SCHEDULE D Income - Gifts

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
Name	
McCarty, Kevin M	

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
Kaiser Foundation Health Plan, Inc	11
ADDRESS (Business Address Acceptable) 6600 Bruceville Road Sacramento CA 95823	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Health Care	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
Sac Metro Chamber An  01 / 27 / 12  \$ 175.00 nual Dinner	
017 27 12 \$ 175.00 Haar Diffile	
	\\ \s
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	\$
► NAME OF SOURCE (Not an Acronym)	▶ NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE · DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	\$
Comments:	,